

DEPARTMENT OF PUBLIC HEALTH
AND HUMAN SERVICES

CHAPTER 104
EMERGENCY MEDICAL SERVICES

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Unofficial

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Subchapter 1
General Provisions

37.104.101 DEFINITIONS The following definitions apply in subchapters 1 through 4:

- (1) "Advanced life support (ALS)" means an advanced life support provider as defined in ARM 24.156.2701.
- (2) "Advanced life support service" means an ambulance service or nontransporting medical unit that has the capacity and is licensed by the department to provide care at the EMT-Paramedic equivalent level 24 hours a day, seven days a week.
- (3) "Advanced life support (ALS) kit" means equipment and supplies necessary to support the level of care and endorsements authorized by the service medical director.
- (4) "Advisory committee" means the department advisory committee specified in 50-6-324, MCA.
- (5) "Ambulance service" means an emergency medical service that utilizes an ambulance.
- (6) "Authorization" means the authorization for an ambulance service or nontransporting medical unit to provide limited advanced life support as provided in ARM 37.104.109.
- (7) "Automated external defibrillator (AED)" means a medical device heart monitor and defibrillator that is approved by the U.S. food and drug administration.
- (8) "Basic equipment kit" means the equipment and supplies required by ARM 37.104.204.
- (9) "Basic life support (BLS)" means a basic life support level of care as defined in ARM 24.156.2701.
- (10) "Basic life support service" means an ambulance service or nontransporting medical unit capable of providing care at the basic life support level and licensed as a provider under ARM 37.104.109.
- (11) "Board" means the Montana board of medical examiners of the department of labor and industry, more commonly referred to as BME or BOME.
- (12) "Emergency medical technician-basic (EMT-B)" means an individual who is licensed by the board as an EMT-B.
- (13) "Emergency medical technician-basic (EMT-basic) equivalent" means one of the following:
 - (a) an EMT-basic;
 - (b) any licensed EMT provider above EMT-B, including endorsements; or
 - (c) a registered nurse with supplemental training.
- (14) "Emergency medical technician-first responder (EMT-F)" means an individual who is licensed by the board as an EMT-F.
- (15) "Emergency medical technician-first responder equivalent" means one of the following:
 - (a) an EMT-F;
 - (b) any licensed EMT provider above EMT-F, including endorsements; or
 - (c) a registered nurse with supplemental training.
- (16) "Emergency medical technician-intermediate (EMT-I)" means an individual who is licensed by the board as an EMT-I.
- (17) "Emergency medical technician-intermediate(EMT-I) equivalent" means one of the following:
 - (a) an EMT-intermediate;
 - (b) any licensed EMT provider above EMT-I, including endorsements; or
 - (c) a registered nurse with supplemental training.
- (18) "Emergency medical technician-paramedic (EMT-P)" means an individual who is

licensed by the board as an EMT-P.

(19) "Emergency medical technician-paramedic (EMT-P) equivalent" means one of the following:

- (a) an EMT-paramedic;
- (b) an EMT provider with an endorsement above EMT-P; or
- (c) a registered nurse with supplemental training.

(20) "FAA" means the federal aviation administration.

(21) "First responder with an ambulance endorsement" means an individual licensed by the board as an EMT-F ambulance (EMT-F3) as listed in ARM 24.156.2751.

(21) "Grandfathered advanced first aid" means a person:

- (a) certified in American red cross emergency response;
- (b) certified in cardiopulmonary resuscitation according to current American heart association standards; and

(c) who was continuously a member of a licensed emergency medical service and was certified in American red cross advanced first aid and emergency care from July 1, 1992 through December 31, 1992.

(22) "Level of service" means either basic life support, intermediate life support or advanced life support service.

(23) "Nontransporting medical unit (NTU)" means a nontransporting unit as specified in ARM 37.104.111.

(24) "Online medical direction" means online medical direction as defined in ARM 24.156.2701.

(25) "Permit" means the sticker affixed to a ground ambulance or a certificate placed in an air ambulance indicating the ambulance vehicle has met the requirements of these rules.

(26) "Statewide protocol" means the statewide protocols defined in ARM 24.156.2701.

(27) "Provisional license" means an emergency medical service license which is granted by the department and is valid for a maximum of 90 days.

(28) "Safety and extrication equipment kit" means the equipment and supplies required in ARM 37.104.205.

(29) "Service medical director" means a person who meets the requirements of a service medical director as provided in ARM 24.156.2701.

(30) "Service plan" means a written description of how an ambulance service or NTU service plans to provide response within its normal service area.

(31) "Stipulations" mean those conditions specified by the department at the time of licensing which must be met by the applicant in order to be licensed as an emergency medical service.

(32) "Supplemental training" means a training program for registered nurses utilized by an emergency medical service that complements their existing education and experience and results in knowledge and skill objectives comparable to the level of EMT training corresponding to the license at which the service is licensed or authorized.

(33) "Temporary permit" means a written authorization of limited duration indicating an ambulance vehicle may be used by a licensed ambulance service until a permit can be issued.

(34) "Transportation equipment kit" means the equipment and supplies required in ARM 37.104.206.

(35) "Type of service" means either an air ambulance fixed wing, air ambulance rotor wing, ground ambulance, or nontransporting medical unit.

37.104.105 LICENSE TYPES AND LEVELS (1) A license will be issued for, and authorize performance of, emergency medical services of a specific type and at a basic or advanced life support level.

(2) Except as specifically provided in this chapter, an emergency medical service may be licensed at an advanced life support level only if they can reasonably provide such service 24 hours a day, seven days a week.

37.104.106 LICENSE APPLICATION REQUIREMENTS (1) An application for a license to conduct an emergency medical service, including the renewal of a license, must be made on forms specified by the department, accompanied by the license fee, and received by the department not less than 30 days prior to the commencement of a new emergency medical service or the expiration of the license, in the case of an application for renewal.

(2) Within 30 days from receipt of an emergency medical service license application or, if the department requests additional information about the application, within 30 days from receipt of that information, the department shall:

- (a) issue the license;
- (b) issue the license with stipulations;
- (c) issue a provisional license; or
- (d) deny the license.

(3) The department may deny an emergency medical services license if:

- (a) the application does not provide all of the requested information; or
- (b) there is evidence that the applicant is not complying with these rules.

(4) If the department does not take action on the application within 30 days after its receipt, the emergency medical services license must be issued unless the applicant is known to be in violation of these rules.

(5) The department shall inspect each emergency medical service prior to issuing a license. If an inspection cannot be conducted, the department may issue a provisional license until an inspection can be completed.

(6) To establish staggered terms of licensing:

(a) When the department receives a completed license application for a new emergency medical service, it will assign that service a number; and

(b) if it grants the license:

(i) an odd numbered service will be issued a license expiring December 31 of the year in which it was issued; and

(ii) an even numbered service will be issued a license expiring December 31 of the year following the year in which it was issued.

(7) If an emergency medical service from another state identifies Montana as part of its service area, and if it regularly provides an initial emergency medical services response into Montana, the emergency medical service must obtain a Montana emergency medical services license as provided by these rules, unless the other state's licensing standards are essentially comparable to those of Montana, in which case the department may license these services through a reciprocal agreement with the other state.

(8) An emergency medical service responding into Montana to transfer patients from a Montana medical facility to a non Montana medical facility is not required to obtain a Montana license if it is licensed in its state of origin.

(9) If a licensed emergency medical service is not reasonably available, the occasional and infrequent transportation by other means is not prohibited.

(10) In a catastrophe or major emergency when licensed ambulances are insufficient to render services required, nonlicensed emergency medical services may be used,

37.104.107 WAIVERS (1) A request for a waiver of any licensing requirement, pursuant to 50-6-325, MCA, must be submitted to the department on a form specified by the department.

(2) An emergency medical service that is issued a waiver must notify the department of any change in the circumstances which originally justified the waiver.

37.104.108 ADVERTISING RESTRICTIONS (1) Except as otherwise specifically provided in this chapter, no person may:

(a) advertise the provision of an emergency medical service without first having obtained a license from the department; or

(b) advertise, allow advertisement of, or otherwise imply provision of emergency medical services at a level of care higher than that for which the service is licensed.

37.104.109 BASIC LIFE SUPPORT SERVICE LICENSING (1) An ambulance service or nontransporting medical unit (NTU) capable of providing service only at the basic life support level will be licensed at the basic life support level.

(1) An ambulance service or NTU that provides advanced life support but cannot reasonably provide it 24 hours per day, seven days per week due to limited personnel, will receive a basic life support license with an authorization to provide advanced life support care.

(2) Ambulance services or NTUs shall request authorization for (1) by submitting a service plan on forms provided by the department.

37.104.110 SERVICE OPERATION (1) An emergency medical service may not be operated in a manner that presents a risk to, threatens, or endangers the public health, safety, or welfare.

37.104.111 NONTRANSPORTING MEDICAL UNIT (1) A nontransporting medical unit is an aggregate of persons who hold themselves out as providers of emergency medical services who:

(a) do not routinely provide transportation to ill or injured persons; and

(b) routinely offer to provide services to the general public beyond the boundaries of a single recreational site, work site, school, or other facility.

(2) A nontransporting EMS service must have an agreement with a licensed ambulance service to ensure continuity of care and adequate transportation for its patients. An ambulance service is not required to approve of or enter into an agreement with a nontransporting EMS service.

(3) A law enforcement agency, fire department, search and rescue unit, ski patrol, or mine rescue unit which does not hold itself out as a provider of emergency medical care to the public shall not be considered a nontransporting service solely because members of that unit or department provide medical care at the scene of a medical emergency to which they were dispatched for other purposes.

37.104.112 STANDARD OF CARE (1) All emergency medical personnel must provide care which conforms to the general standard of care promulgated by the board of medical examiners

37.104.114 LICENSE RENEWALS (1) License renewals will be for two year periods and will expire on December 31 of the second year of the period.

37.104.115 APPEAL FROM ORDER (1) An order issued by the department may be appealed to the department if the person named in the order submits a written request for a hearing before the department.

(2) In order for the hearing request to be effective, the written request must be received by the department within 30 calendar days after the date a notice of violation and order is served upon the person requesting the hearing.

37.104.120 ADVISORY COMMITTEE (1) An advisory committee will consist of a physician appointed by the department and one representative of each type and level of service licensed, selected from a group of individuals who have expressed an interest in serving on the committee and who have completed and returned the forms specified by the department, with adequate consideration to demographics and geographics.

(2) Members of the committee shall serve 2 or 3 year terms with the initial terms of membership randomly assigned.

(3) The committee may conduct its business by a meeting or, when appropriate, by a telephone conference call.

Subchapter 2 Licensing of Ambulance Service

37.104.201 COMMUNICATIONS (1) A ground ambulance must have a VHF mobile radio, and an air ambulance must have a VHF portable radio, each with a minimum of the following:

- (a) dual tone multi-frequency encoder;
- (b) frequency 155.280 mHz;
- (c) frequency 155.340 mHz;
- (d) frequency 155.325 mHz;
- (e) frequency 155.385 mHz; and
- (f) frequency 153.905 mHz.

(2) A nontransporting unit must have the capability of providing at least one radio at every emergency medical scene with a minimum of the following:

- (a) frequency 155.280 mHz;
- (b) frequency 155.340 mHz; and
- (c) frequency 153.905 mHz.

(3) An emergency medical service must have current legal authorization to use each of the frequencies required in (2).

37.104.202 SAFETY: GENERAL REQUIREMENTS (1) All ambulance vehicles and all emergency medical services equipment must be maintained in a safe and operating condition.

(2) Each emergency medical service must establish written policies and procedures for, and maintain written documentation of, the preventive maintenance of ambulances and emergency medical equipment.

(3) All oxygen cylinders must be secured so that they will not roll, tip over, or become projectiles in the event of a sudden vehicular maneuver.

(4) Emergency medical services personnel must be alert and capable during an emergency response.

37.104.203 EQUIPMENT (1) A basic equipment kit must be in each ground ambulance and available to each nontransporting unit and air ambulance on every call.

(2) When a transportation equipment kit or safety and extrication kit is required, it must be physically in each ground ambulance at all times and available to each air ambulance on every call.

(3) An advanced life support kit does not need to be permanently stored on or in an ambulance or nontransporting unit, but may be kept separately in a modular, prepackaged form, so long as it is available for rapid loading and easy access at the time of an emergency response.

37.104.204 BASIC EQUIPMENT KIT (1) A basic equipment kit must include all of the following equipment and supplies:

- (a) two air occlusive dressings;
- (b) one blood pressure manometer with adult, extra large adult, and pediatric cuffs;
- (c) one stethoscope;
- (d) five dressings (assorted);
- (e) two pairs of exam gloves;
- (f) one pair of safety glasses to provide splash protection for the emergency care provider;
- (g) one surgical mask;
- (h) one oral glucose;
- (i) one flashlight;
- (j) four soft roller bandages;
- (k) four rolls of adhesive tape of assorted sizes;
- (l) four triangular bandages;
- (m) four oropharyngeal airways of assorted child and adult sizes;
- (n) one mouth to mask resuscitator with one-way valve, oxygen inlet and oxygen connecting tubing;
- (o) one bulb syringe or equivalent suction apparatus;
- (p) one portable oxygen system containing at least 200 liters of oxygen and with regulator and flowmeter;
- (q) one adult and one pediatric oxygen mask;
- (r) one nasal oxygen cannula;
- (s) one pair of scissors;
- (t) one pair of heavy leather gloves;
- (u) one helmet for personnel that is capable of protection from head injury; and
- (v) paper and pen or pencil.

37.104.205 SAFETY AND EXTRICATION KIT (1) A safety and extrication kit must include the following equipment and supplies:

- (a) a total of five pounds of ABC fire extinguisher, except for an extinguisher in an air ambulance, which must meet FAA standards;
- (b) one short immobilization device with patient securing materials;
- (c) three rigid cervical collars of assorted sizes;
- (d) one phillips screwdriver;
- (e) one straight blade screwdriver;
- (f) one spring loaded center punch;
- (g) one crescent wrench;
- (h) one pair pliers; and
- (i) one hacksaw and blade

37.104.206 TRANSPORTATION EQUIPMENT KIT (1) A transportation and equipment kit must include the following equipment and supplies:

- (a) one suction unit, either portable or permanently installed, which operates either electrically or by engine vacuum and includes all necessary operating accessories;
- (b) an oxygen supply administration system containing a minimum of 1,000 liters of oxygen;
- (c) one sterile disposable humidifier;
- (d) one rigid pharyngeal suction tip;
- (e) one long spinal immobilization device with patient securing materials;
- (f) one lower extremity traction device;
- (g) two lower extremity rigid splints;
- (h) two upper extremity rigid splints;
- (i) one ambulance cot with at least two restraining straps and, with the exception of an air ambulance litter, four wheels and the capability of elevating the head; and
- (j) clean linen for the primary cot and for replacement.

37.104.208 SANITATION (1) Each emergency medical service must develop and adhere to a written service sanitation policy that includes at least a method to dispose of contaminated materials meeting the minimum requirements set out in (2), as well as the following standards:

- (a) Products for cleaning shall contain a recognized, effective germicidal agent;
- (b) Disposable equipment must be disposed of after its use;
- (c) Any equipment that has come in contact with body fluids or secretions must be cleaned with a recognized germicidal/viricidal product;
- (d) Linen must be changed after every use;
- (e) Oxygen humidifiers must be single service and disposable; and
- (f) Needles must not be recapped, bent, or broken, and must be disposed of in a container that provides protection to personnel from a needle puncture.

(2) Each emergency medical service must do at least the following in disposing of infectious waste:

- (a) Each service shall store, transport off the premises, and dispose of infectious waste as defined in 75-10-1003, MCA and in accordance with the requirements set forth in 75-10-1005, MCA; and
- (b) Used sharps shall be properly packaged and labeled as provided in 75-10-1005, MCA and as required by the occupational safety and health administration (OSHA).

(3) The interior of an ambulance, including all storage areas, must be kept clean and free from dirt, grease and other offensive matter.

37.104.212 RECORDS AND REPORTS (1) Each emergency medical service must maintain a trip report for every run in which patient care was offered or provided, which contains at least the following information:

- (a) identification of the emergency medical services provider;
- (b) date of the call;
- (c) patient's name and address;
- (d) type of run;
- (e) identification of all emergency medical services providers, riders, trainees, or service personnel officially responding to the call;
- (f) the time:
 - (i) the dispatcher was notified;
 - (ii) the emergency medical service was notified;
 - (iii) the emergency medical service was enroute;
 - (iv) of arrival on the scene;

- (v) the service departed the scene or turned over the patient to an ambulance service; and
 - (vi) of arrival at receiving hospital, if applicable;
 - (g) history of the patient's illness or injury, including the findings of the physical examination;
 - (h) treatment provided or offered by the emergency medical services personnel, including, when appropriate, a record of all medication administered, the dose, and the time administered;
 - (i) record of the patient's vital signs, including the time taken, if applicable;
 - (j) utilization of online medical control, if applicable; and
 - (k) destination of the patient, if applicable.
- (2) Trip reports may be reviewed by the department.
- (3) Copies of trip reports must be maintained by the service for a minimum of seven years.
- (4) Each emergency medical service must provide the department with a quarterly report, on a form provided by the department, that specifies the number and types of runs occurring during the quarter, the type of emergency, and the average response times.
- (5) Immediately or as soon as possible upon arrival at a receiving facility, but no later than 48 hours after the end of the patient transport, an ambulance service must provide a copy of the trip report to the hospital that receives the patient.

37.104.213 PERSONNEL REQUIREMENTS (1) Each emergency medical service must meet the following personnel standards:

- (a) All personnel functioning on the emergency medical service must have current certificates, licenses, proof of training or evidence of legal authorization to function;
 - (b) Emergency medical services personnel may use only that equipment and perform those skills for which they are trained, certified, or licensed and legally permitted to use;
 - (c) When functioning under the conditions defined in ARM 24.156.2771, a licensed service may use EMTs licensed in another state to provide basic life support; and
 - (d) EMTs on licensed services may carry and administer auto-injectors as provided for in ARM 24.156.2771.
- (2) All ambulances must have at least one of the required personnel as set forth in ARM 37.104.316, 37.104.319, 37.104.326, 37.104.329, 37.104.401, and 37.104.404 attending the patient, and, when providing care at an advanced life support level, the person certified at the corresponding level must attend the patient.

37.104.218 MEDICAL CONTROL: SERVICE MEDICAL DIRECTOR

- (1) Each emergency medical service that provides service at the advanced life support level shall have a service medical director.
- (2) The requirements and responsibilities of the service medical director shall be as defined in ARM 24.156.2701.
- (3) As provided in ARM 24.156.2701, a designated service medical director must be a physician or physician assistant who is responsible professionally and legally for overall medical care provided by a licensed ambulance service.

37.104.221 MEDICAL CONTROL: ADVANCED LIFE SUPPORT

- (1) An advanced life support service must have a two-way communications system, approved by the department, with either:
- (a) a 24-hour physician-staffed emergency department; or
 - (b) a physician or physicians approved by the service medical director.

Subchapter 3
Specific Ambulance Licensure Requirements

37.104.301 AMBULANCE (1) No ambulance may be utilized by an emergency medical service until the department has inspected the ambulance; found it is, at the time of inspection, in compliance with these rules; and issued a permit to the emergency medical service for the ambulance. The department may issue a temporary permit, by mail or otherwise, until an inspection can be completed.

(2) The ambulance permit must be displayed either on or in the ambulance as the department directs.

(3) The department may revoke the ambulance permit at any time if the vehicle is no longer in compliance with these rules.

(4) The decision to deny or revoke an ambulance permit may be appealed to the department if the emergency medical service submits a written request for an informal reconsideration to the department within 30 days after the service receives written notice of the decision to revoke or deny the permit.

(a) If a timely request for an informal reconsideration is received, the reconsideration will be conducted within 30 days following the receipt of the request. Such informal reconsideration shall be conducted in accordance with the procedures specified for informal reconsiderations in ARM 37.5.311, and is not subject to the contested case provisions of the Montana Administrative Procedure Act, Title 2, chapter 4, MCA or, except as provided in this rule, the provisions of ARM 37.5.304, 37.5.305, 37.5.307, 37.5.310, 37.5.311, 37.5.313, 37.5.316, 37.5.318, 37.5.322, 37.5.325, 37.5.328, 37.5.331, 37.5.334 and 37.5.337.

(5) The decision of the department after an informal reconsideration conducted pursuant to this rule is a final agency decision

37.104.305 AMBULANCE SPECIFICATIONS: GENERAL (1) A new ambulance, except one that was in service in Montana in a licensed ambulance service on or before January 1, 1990, must have the following:

(a) a patient envelope, available at all times for the primary patient, above the upper torso and head and providing a minimum rectangle of space above the stretcher that is free of all projections and encumbrances, with an allowance for the curvature of the fuselage of an aircraft and the following dimensions:

- (i) 18 inches wide;
- (ii) 28 inches high;
- (iii) 30 inches long;

(b) additional contiguous space above the lower extremities which provides a minimum rectangle of space above the stretcher with the following dimensions:

- (i) 18 inches wide;
- (ii) 18 inches high;
- (iii) 42 inches long;

(c) space available for the attendant above the stretcher, free of all projections and encumbrances, with the following dimensions:

- (i) 14 inches wide;
- (ii) 18 inches long;
- (iii) 28 inches above the patient cot;

(d) attendant space available at the head or either side of the patient envelope;

(e) a patient compartment isolated throughout the medical mission so that:

- (i) the medically related activities do not interfere with the safe operation of the ambulance;
 - (ii) the vehicle controls and radios are physically protected from any intended or accidental interference by the secured patient; and
 - (iii) the driver or pilot's out-of-ambulance vision is protected from the reflections of cabin lighting by a blackout curtain, a permanently installed partition, or lighting in blue or red, none of which may interfere with the safe operation of the ambulance.
- (2) All ambulances must be equipped with:
- (a) seat belts for the driver, attendants, and seated patients; and safety belts to secure the patient to the cot;
 - (b) a mechanism of securing the cot;
 - (c) interior lighting in the patient compartment sufficient to allow visual determination of the patient's condition and vital signs

37.104.306 AMBULANCE SPECIFICATIONS: GROUND AMBULANCES

- (1) All ground ambulances must have the following markings and emblems:
- (a) The word "ambulance" must be affixed in mirror image in reflectorized lettering, centered above the grill on the front of the vehicle; and
 - (b) The word "ambulance" must be affixed to the rear of the vehicle in reflectorized lettering.
- (2) The required markings may not appear on nonlicensed ambulances, with the exception of those ambulances temporarily in transit within the state.
- (3) An ambulance must be equipped with operational emergency lighting and siren.
- (4) All new ambulances, except those in service in Montana on or before January 1, 1990, must be equipped with audible backup warning devices.

37.104.307 AMBULANCE SPECIFICATIONS: AIR AMBULANCE

- (1) A rotor wing air ambulance must be fitted with an FAA-approved, externally mounted, searchlight of at least 300,000 candle power, capable of being controlled by the pilot without removing his hands from the flight controls, with a minimum motion of 90 degrees vertical and 180 degrees horizontal.
- (2) The stretcher for the air ambulance must be secured by an FAA-approved method and must meet FAA static test load factors.
- (3) The entrance in an ambulance for patient loading must be constructed so that under normal circumstances the stretcher does not require excessive tilting or rotation around the pitch or roll axis.

- #### 37.104.311 SAFETY: GROUND AMBULANCE SERVICES
- (1) Except as provided in (3), an emergency medical service must take measures to assure that the carbon monoxide level in a ground ambulance does not exceed 10 parts per million accumulation at the head of the patient stretcher. The service must continuously maintain in the patient compartment:
- (a) a disposable carbon monoxide detector, approved by the department, which is capable of immediately detecting a dangerous rise in the carbon monoxide level; or
 - (b) an electronic carbon monoxide monitor.
- (2) Services that use a disposable carbon monoxide detector must also:
- (a) write on the detector the date of its placement; and
 - (b) keep replaced detectors for a period of three years.
- (3) An emergency medical service is not required to maintain a carbon monoxide detector in a diesel powered ambulance.
- (4) Windshields must be free from all cracks within the windshield wiper coverage area.

(5) Tires must have at least 4/32 inch of tread depth, measured at two points not less than 15 inches apart in any major tread groove at or near the center of the tire.

(6) No one may smoke in a ground ambulance.

37.104.312 SAFETY: AIR AMBULANCE (1) Each stretcher support must have, as a minimum, FAA-approved provisions for securing a 95th percentile adult American male patient, consisting of individual restraints across the chest and legs, and, with the exception of rotor wing ambulances, a shoulder harness that meets FAA technical service order standards.

(2) In rotor wing ambulances, high pressure containers and lines for medical gases may not be positioned in the scatter zone of the engine turbine wheels, unless adequate protection is provided to prevent penetration by turbine blade and wheel parts.

(3) Survival gear applicable to the needs of the area of operation and the number of occupants must be carried on board and appropriately maintained.

(4) Any modifications to the interior of an aircraft to accommodate medical equipment must have FAA approval and be maintained to FAA standards.

(5) No one may smoke in an air ambulance.

(6) An emergency medical service must take measures to assure that the carbon monoxide level does not exceed 10 parts per million accumulation at the head of the patient stretcher or in the pilot's compartment, including the following:

(a) continuously maintaining, in the patient compartment and in the pilot's compartment, disposable or electronic carbon monoxide detectors, approved by the department, which are capable of immediately detecting a dangerous rise in the carbon monoxide level;

(b) writing on each of the disposable detectors the date of its placement, and replacing it prior to the expiration date;

(c) keeping replaced disposable detectors for a period of three years after the date of their replacement.

37.104.316 PERSONNEL REQUIREMENTS: BASIC LIFE SUPPORT GROUND AMBULANCE SERVICE (1) A basic life support ground ambulance service must ensure that at least two of the following individuals are on board the ambulance when a patient is loaded or transported, with the proviso that having only two EMT-Fs with ambulance endorsements on a call is not allowed:

(a) a grandfathered person certified in advanced first aid;

(b) an EMT-basic equivalent; or

(c) a physician.

(2) A basic life support ambulance service may be authorized as provided in ARM 37.104.320 to provide on some calls, based on personnel availability, a higher level of care than that for which it is licensed.

37.104.319 PERSONNEL: ADVANCED LIFE SUPPORT GROUND AMBULANCE SERVICE (1) An advanced life support ground ambulance service must:

(a) meet the personnel requirements of a basic life support ground ambulance service contained in ARM 37.104.316; and

(b) when transporting a patient at the advanced life support level, ensure that one of the required personnel is an advanced life support EMT.

37.104.320 AUTHORIZATION (1) In order for a basic service to be authorized at a higher level of service, it must:

(a) apply on forms provided by the department; and

(b) have an approved service medical director.

37.104.325 PERSONNEL: AIR AMBULANCE, GENERAL (1) All air ambulance personnel who are added to the roster of the service after January 1, 1993, must be certified by their local medical director as having completed the knowledge and skill objectives of an aeromedical training program approved by the department, with the exception that a new employee may function as an air ambulance attendant for a maximum of one year without this aeromedical training.

(2) During inter-facility transfers by air ambulance, the service medical director may specify the level of training personnel in attendance must have in order to match the medical needs of the patient, with the proviso that (1) above must still be complied with.

37.104.326 PERSONNEL: BASIC LIFE SUPPORT AIR AMBULANCE SERVICE (1) A basic life support air ambulance must meet the personnel requirements of a basic life support ground ambulance contained in ARM 37.104.316, with the exception that only one person is required in addition to the pilot.

37.104.329 PERSONNEL: ADVANCED LIFE SUPPORT AIR AMBULANCE SERVICE
(1) In addition to the pilot, one advanced life support EMT is required.

37.104.330 EMT LEVEL OF CARE LIMITATIONS (1) With the exception of a physician or the circumstances described in ARM 37.104.335(3), individual personnel shall not provide a level of care higher than the level and type for which the emergency medical service is licensed. The service must be licensed or authorized to operate at the highest level it plans to allow individuals to provide care

37.104.335 OTHER REQUIREMENTS: AMBULANCE SERVICES

(1) If an ambulance service publicly advertises a telephone number to receive calls for emergency assistance, that telephone number must be answered 24 hours a day, seven days per week.

(2) An ambulance service may transport patients who are receiving care at a higher level than the level for which the service is licensed if:

(a) The higher level of care is initiated by a licensed emergency medical service authorized to perform that level of care; and

(b) The personnel and the equipment of the emergency medical services licensed at the higher level accompany the patient in the ambulance.

(3) An ambulance service may perform inter-facility (including between a physician's office and hospital) transfers at a higher level of care than the level to which the service is licensed if personnel trained and legally authorized to provide the higher level of care, as well as appropriate equipment, accompany the patient in the ambulance to assure continuity of patient care.

(4) Ambulance services may use only those vehicles which have received either a permit or a temporary permit from the department.

37.104.336 OTHER REQUIREMENTS: AIR AMBULANCE SERVICE

(1) An air ambulance service must be licensed under current FAA regulations.

Subchapter 4
Specific Nontransporting Services License Requirements

37.104.401 PERSONNEL: BASIC LIFE SUPPORT NONTRANSPORTING UNIT (1) At least one of the following individuals must be on each call:

- (a) a person with a grandfathered advanced first aid training;
- (b) an EMT-first responder (EMT-F);
- (c) an EMT-first responder equivalent; or
- (d) a licensed physician

37.104.404 PERSONNEL: ADVANCED LIFE SUPPORT NONTRANSPORTING UNIT
(1) An advanced life support nontransporting unit must:
(a) meet the personnel requirements of a basic life support nontransporting unit contained in ARM 37.104.401; and
(b) when responding at the advanced life support level, ensure that at least one advanced level EMT is on the call

37.104.410 OTHER REQUIREMENTS: NONTRANSPORTING SERVICES
(1) A nontransporting unit must:
(a) Assure that patients are not transported by a nonlicensed ambulance service, unless a licensed service is not reasonably available;
(b) Assure either that the patient is always transported by an ambulance service licensed to provide at least the same level of patient care commenced by the nontransporting service or that the ambulance service carries the personnel and equipment of the nontransporting service with the patient to the hospital if a level of care has commenced which the ambulance service cannot legally continue;
(c) Have a written dispatch policy and procedure coordinated with a licensed ambulance service.

Version